

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/586,700
Filing Date	with an effective filing date of January 18, 2005
First Named Inventor	Klaus WÖBKE
Group Art Unit	
Examiner Name	
Attorney Docket Number	LORWER P46AUS
Total No. of Pages in this Submission: 5	

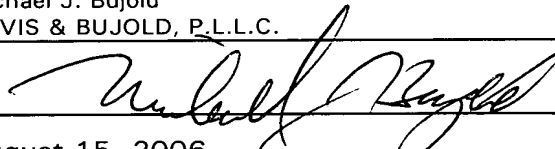
Fax: (571) 273-8300

ENCLOSURES (check all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee attached
<input type="checkbox"/> Amendment/Response
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
(in Duplicate)
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Part/s
Incomplete Application
<input type="checkbox"/> Response to Missing Parts
under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment papers
(for an Application)
<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition Routing Slip (PTO/SB/69)
and Accompanying Petition
(DELETED - no longer useful)
<input type="checkbox"/> To Convert a Provisional Petition
<input type="checkbox"/> Declaration and Power of Attorney
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> Request for Refund | <input type="checkbox"/> After Allowance Communication
to Group
<input type="checkbox"/> Appeal Communication to Board
of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input type="checkbox"/> Additional Enclosure(s)
(please identify below):
Postcard
Submission Missing Parts - 1pg |
|---|---|---|

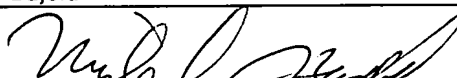
REMARKS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Michael J. Bujold DAVIS & BUJOLD, P.L.L.C.	Reg. No. 32,018 CUSTOMER NO. 020210
Signature		
Date	August 15, 2006	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 15, 2006.

Type or printed name	Michael J. Bujold
Signature	 Date: August 15, 2006 (tac)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2006		Application No. Filing Date First Named Inventor Examiner Name Art Unit	10/586,700 with an effective filing date of January 18, 2005 Klaus WÖBKE
Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	
TOTAL AMOUNT OF PAYMENT: \$65		LORWER P46AUS	

METHOD OF PAYMENT (check all that apply)

☒ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): _____

☒ Deposit Account
 Deposit Account Number 04-0213
 Deposit Account Name: DAVIS & BUJOLD, P.L.L.C

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below
 ☐ Charge fee(s) indicated below except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
 ☒ Credit any overpayments

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FEE CALCULATION

1. **BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. **EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims -20 or HP = Extra Claims x Fee (\$) = Fee Paid (\$)
 Multiple Dependent Claims
Fee (\$) Fee Paid (\$)

Indep. Claims -3 or HP + Extra Claims x Fee (\$) = Fee Paid (\$)
 HP = highest number of independent claims paid for, if greater than 3.

3. **APPLICATION SIZE FEE**
 If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets -100 = Extra Sheets / 50 = No. of each additional 50 or fraction thereof (round up to a whole number) x Fee (\$) = Fee Paid (\$)

4. **OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)

Other (e.g., late filing surcharge): Late Filing Surcharge = \$65

SUBMITTED BY

Signature		Telephone (603) 226-7490
Name (Print/Type)	Michael J. Bujold	Registration No. (Atty/Agent) 32,018 Date: August 15, 2006



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Klaus WÖBKE
Serial no. : 10/586,700
Filed : with an effective filing date of January 18, 2005
For : BANGLE
Docket : LORWER P46AUS

The Commissioner for Patents
U.S. Patent & Trademark Office
P. O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF MISSING PARTS OF APPLICATION

Further to the filing of this application, a signed Declaration and Power of Attorney form is attached to complete this filing. Also attached, please find our firm's check in the amount of \$65 which covers the surcharge, submitted on the small entity basis.

In the event that there are any fee deficiencies or additional fees are payable, please charge the same or credit any overpayment to our Deposit Account (Account No. 04-0213).

Respectfully submitted,



Michael J. Bujold, Reg. No. 32,018

Customer No. 020210
Davis & Bujold, P.L.L.C.
112 Pleasant Street
Concord, NH 03301-2931
Telephone 603-226-7490
Facsimile 603-226-7499
E-mail: patent@davisandbujold.com

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